

TABLE A. — ACUTE INPATIENT FACILITY NATIONWIDE  
PER DIEM CHARGES, BY DRG (DIAGNOSIS RELATED GROUP)

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DRG	Description	Surgical/Non-Surgical Indicator	Per Diem Charge		
			Standard Room and Board	ICU Room and Board	Ancillary
001	CRANIOTOMY AGE >17 W CC	S	\$1,440.98	\$3,049.48	\$5,762.88
002	CRANIOTOMY AGE >17 W/O CC	S	\$1,498.02	\$3,236.62	\$8,415.51
003	CRANIOTOMY AGE 0-17	S	\$1,618.21	\$3,475.87	\$7,016.24
006	CARPAL TUNNEL RELEASE	S	\$1,210.17	\$2,262.10	\$4,233.28
007	PERIPH & CRANIAL NERVE & OTHER NERV SYST PROC W CC	S	\$1,345.87	\$2,593.20	\$4,013.20
008	PERIPH & CRANIAL NERVE & OTHER NERV SYST PROC W/O CC	S	\$1,421.72	\$2,918.28	\$11,875.34
009	SPINAL DISORDERS & INJURIES	N	\$1,123.53	\$2,974.49	\$1,863.42
010	NERVOUS SYSTEM NEOPLASMS W CC	N	\$1,395.10	\$2,783.69	\$2,642.38
011	NERVOUS SYSTEM NEOPLASMS W/O CC	N	\$1,377.16	\$2,662.32	\$3,055.99
012	DEGENERATIVE NERVOUS SYSTEM DISORDERS	N	\$1,261.50	\$2,232.75	\$1,171.79
013	MULTIPLE SCLEROSIS & CEREBELLAR ATAXIA	N	\$1,326.52	\$2,462.11	\$2,042.80
014	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION	N	\$1,214.29	\$2,490.49	\$2,793.20
015	NONSPECIFIC CVA & PRECEREBRAL OCCLUSION W/O INFARCT	N	\$1,025.88	\$2,173.96	\$2,429.38
016	NONSPECIFIC CEREBROVASCULAR DISORDERS W CC	N	\$1,176.30	\$2,182.80	\$2,596.28
017	NONSPECIFIC CEREBROVASCULAR DISORDERS W/O CC	N	\$1,247.24	\$2,252.69	\$2,715.25
018	CRANIAL & PERIPHERAL NERVE DISORDERS W CC	N	\$1,187.06	\$2,182.43	\$2,427.00
019	CRANIAL & PERIPHERAL NERVE DISORDERS W/O CC	N	\$1,336.07	\$2,579.64	\$2,823.70
020	NERVOUS SYSTEM INFECTION EXCEPT VIRAL MENINGITIS	N	\$1,236.18	\$2,672.30	\$3,603.85
021	VIRAL MENINGITIS	N	\$1,216.50	\$2,469.85	\$3,585.20
022	HYPERTENSIVE ENCEPHALOPATHY	N	\$1,149.00	\$2,237.10	\$2,958.77
023	NONTRAUMATIC STUPOR & COMA	N	\$1,379.64	\$2,641.06	\$2,834.92
024	SEIZURE & HEADACHE AGE >17 W CC	N	\$1,285.10	\$2,390.49	\$2,788.62
025	SEIZURE & HEADACHE AGE >17 W/O CC	N	\$1,404.77	\$2,524.55	\$2,862.59
026	SEIZURE & HEADACHE AGE 0-17	N	\$1,987.25	\$4,586.14	\$5,272.39
027	TRAUMATIC STUPOR & COMA, COMA >1 HR	N	\$1,348.40	\$3,212.05	\$3,615.44
028	TRAUMATIC STUPOR & COMA, COMA <1 HR AGE >17 W CC	N	\$1,367.70	\$3,106.02	\$2,877.56
029	TRAUMATIC STUPOR & COMA, COMA <1 HR AGE >17 W/O CC	N	\$1,303.56	\$3,084.33	\$2,467.45
030	TRAUMATIC STUPOR & COMA, COMA <1 HR AGE 0-17	N	\$1,052.20	\$2,291.83	\$1,983.36
031	CONCUSSION AGE >17 W CC	N	\$1,355.07	\$3,075.97	\$3,334.46
032	CONCUSSION AGE >17 W/O CC	N	\$1,513.66	\$3,092.01	\$3,652.46
033	CONCUSSION AGE 0-17	N	\$1,622.48	\$3,212.15	\$3,375.10
034	OTHER DISORDERS OF NERVOUS SYSTEM W CC	N	\$1,191.38	\$2,632.72	\$2,337.32
035	OTHER DISORDERS OF NERVOUS SYSTEM W/O CC	N	\$1,233.98	\$2,604.77	\$2,199.71
036	RETINAL PROCEDURES	S	\$3,000.90	\$4,004.08	\$15,371.48
037	ORBITAL PROCEDURES	S	\$1,761.06	\$4,026.92	\$6,454.02
038	PRIMARY IRIS PROCEDURES	S	\$1,614.05	\$1,836.63	\$3,675.93
039	LENS PROCEDURES WITH OR WITHOUT VITRECTOMY	S	\$1,912.60	\$3,254.66	\$5,240.70
040	EXTRAOCULAR PROCEDURES EXCEPT ORBIT AGE >17	S	\$1,883.49	\$2,906.42	\$4,830.69
041	EXTRAOCULAR PROCEDURES EXCEPT ORBIT AGE 0-17	S	\$1,363.38	\$2,548.74	\$4,063.21
042	INTRAOCULAR PROCEDURES EXCEPT RETINA, IRIS & LENS	S	\$1,955.50	\$4,022.44	\$6,781.35
043	HYPHEMA	N	\$1,828.09	\$3,873.41	\$2,454.34
044	ACUTE MAJOR EYE INFECTIONS	N	\$1,446.38	\$4,158.68	\$1,867.99
045	NEUROLOGICAL EYE DISORDERS	N	\$1,378.92	\$1,924.30	\$3,386.49
046	OTHER DISORDERS OF THE EYE AGE >17 W CC	N	\$1,276.39	\$2,475.01	\$2,245.34
047	OTHER DISORDERS OF THE EYE AGE >17 W/O CC	N	\$1,404.87	\$1,765.57	\$2,068.27
048	OTHER DISORDERS OF THE EYE AGE 0-17	N	\$1,277.60	\$2,122.22	\$2,061.43
049	MAJOR HEAD & NECK PROCEDURES	S	\$1,580.41	\$3,360.81	\$9,110.27
050	SIALOADENECTOMY	S	\$1,704.56	\$3,193.17	\$10,646.31
051	SALIVARY GLAND PROCEDURES EXCEPT SIALOADENECTOMY	S	\$1,505.94	\$3,437.13	\$6,829.38
052	CLEFT LIP & PALATE REPAIR	S	\$2,119.45	\$3,367.44	\$9,172.59
053	SINUS & MASTOID PROCEDURES AGE >17	S	\$1,452.55	\$2,885.31	\$6,915.26
054	SINUS & MASTOID PROCEDURES AGE 0-17	S	\$1,195.17	\$2,590.56	\$5,710.38

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PER DIEM CHARGES, BY DRG (DIAGNOSIS RELATED GROUP)

DRG	Description	Surgical/Non-Surgical Indicator	Per Diem Charge		
			Standard Room and Board	ICU Room and Board	Ancillary
055	MISCELLANEOUS EAR, NOSE, MOUTH & THROAT PROCEDURES	S	\$1,356.30	\$2,736.02	\$6,260.40
056	RHINOPLASTY	S	\$1,471.64	\$3,261.76	\$6,719.08
057	T&A PROC, EXCEPT TONSILLECTOMY &/OR ADENOIDECTOMY ONLY, AGE >17	S	\$1,311.89	\$2,641.46	\$4,872.22
058	T&A PROC, EXCEPT TONSILLECTOMY &/OR ADENOIDECTOMY ONLY, AGE 0-17	S	\$1,299.75	\$2,765.69	\$4,589.76
059	TONSILLECTOMY &/OR ADENOIDECTOMY ONLY, AGE >17	S	\$1,258.95	\$1,798.23	\$5,467.78
060	TONSILLECTOMY &/OR ADENOIDECTOMY ONLY, AGE 0-17	S	\$1,140.10	\$4,112.56	\$6,437.47
061	MYRINGOTOMY W TUBE INSERTION AGE >17	S	\$1,669.79	\$2,404.03	\$5,664.68
062	MYRINGOTOMY W TUBE INSERTION AGE 0-17	S	\$1,475.29	\$2,680.84	\$4,216.21
063	OTHER EAR, NOSE, MOUTH & THROAT O.R. PROCEDURES	S	\$1,644.21	\$3,281.71	\$6,250.82
064	EAR, NOSE, MOUTH & THROAT MALIGNANCY	N	\$1,560.52	\$2,932.25	\$2,845.68
065	DYSEQUILIBRIUM	N	\$1,323.77	\$2,291.26	\$2,947.58
066	EPISTAXIS	N	\$1,277.45	\$2,406.23	\$2,554.19
067	EPIGLOTTITIS	N	\$1,233.80	\$3,593.33	\$3,363.39
068	OTITIS MEDIA & URI AGE >17 W CC	N	\$1,135.68	\$2,100.55	\$2,551.84
069	OTITIS MEDIA & URI AGE >17 W/O CC	N	\$1,200.91	\$2,501.98	\$2,524.81
070	OTITIS MEDIA & URI AGE 0-17	N	\$2,053.94	\$3,662.11	\$4,234.65
071	LARYNGOTRACHEITIS	N	\$924.73	\$1,797.39	\$2,110.03
072	NASAL TRAUMA & DEFORMITY	N	\$1,386.20	\$2,582.70	\$2,923.89
073	OTHER EAR, NOSE, MOUTH & THROAT DIAGNOSES AGE >17	N	\$1,240.21	\$2,398.92	\$2,463.00
074	OTHER EAR, NOSE, MOUTH & THROAT DIAGNOSES AGE 0-17	N	\$1,749.14	\$3,416.76	\$3,355.75
075	MAJOR CHEST PROCEDURES	S	\$1,596.25	\$2,954.93	\$5,755.30
076	OTHER RESP SYSTEM O.R. PROCEDURES W CC	S	\$1,307.32	\$2,460.80	\$3,717.67
077	OTHER RESP SYSTEM O.R. PROCEDURES W/O CC	S	\$1,410.07	\$2,399.28	\$4,199.96
078	PULMONARY EMBOLISM	N	\$1,096.86	\$2,007.23	\$2,622.68
079	RESPIRATORY INFECTIONS & INFLAMMATIONS AGE >17 W CC	N	\$1,171.65	\$2,147.04	\$2,579.19
080	RESPIRATORY INFECTIONS & INFLAMMATIONS AGE >17 W/O CC	N	\$1,076.48	\$2,084.82	\$1,996.10
081	RESPIRATORY INFECTIONS & INFLAMMATIONS AGE 0-17	N	\$1,243.74	\$2,247.52	\$2,660.10
082	RESPIRATORY NEOPLASMS	N	\$1,250.48	\$2,214.64	\$2,818.90
083	MAJOR CHEST TRAUMA W CC	N	\$1,159.26	\$2,223.29	\$2,407.53
084	MAJOR CHEST TRAUMA W/O CC	N	\$1,323.67	\$2,786.92	\$2,349.88
085	PLEURAL EFFUSION W CC	N	\$1,172.81	\$2,074.65	\$2,632.92
086	PLEURAL EFFUSION W/O CC	N	\$1,326.62	\$2,324.44	\$3,028.52
087	PULMONARY EDEMA & RESPIRATORY FAILURE	N	\$988.35	\$2,021.78	\$2,454.58
088	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	N	\$1,034.70	\$1,941.29	\$2,218.73
089	SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	N	\$1,081.18	\$1,989.81	\$2,288.97
090	SIMPLE PNEUMONIA & PLEURISY AGE >17 W/O CC	N	\$1,074.56	\$2,003.84	\$2,017.68
091	SIMPLE PNEUMONIA & PLEURISY AGE 0-17	N	\$1,933.83	\$4,133.66	\$3,940.47
092	INTERSTITIAL LUNG DISEASE W CC	N	\$1,193.29	\$2,185.46	\$2,719.12
093	INTERSTITIAL LUNG DISEASE W/O CC	N	\$1,232.01	\$2,047.41	\$2,689.27
094	PNEUMOTHORAX W CC	N	\$1,074.10	\$2,075.26	\$2,427.02
095	PNEUMOTHORAX W/O CC	N	\$1,190.14	\$2,289.18	\$2,357.99
096	BRONCHITIS & ASTHMA AGE >17 W CC	N	\$1,086.39	\$2,027.14	\$2,255.11
097	BRONCHITIS & ASTHMA AGE >17 W/O CC	N	\$1,093.63	\$1,958.64	\$2,141.56
098	BRONCHITIS & ASTHMA AGE 0-17	N	\$1,022.96	\$3,801.34	\$3,578.14
099	RESPIRATORY SIGNS & SYMPTOMS W CC	N	\$1,165.04	\$2,122.56	\$3,169.89
100	RESPIRATORY SIGNS & SYMPTOMS W/O CC	N	\$1,200.96	\$2,079.62	\$3,772.88
101	OTHER RESPIRATORY SYSTEM DIAGNOSES W CC	N	\$1,181.23	\$2,152.28	\$2,755.72
102	OTHER RESPIRATORY SYSTEM DIAGNOSES W/O CC	N	\$1,212.28	\$2,074.30	\$2,959.87
103	HEART TRANSPLANT OR IMPLANT OF HEART ASSIST SYSTEM	S	\$1,431.59	\$3,974.19	\$11,789.16
104	CARDIAC VALVE & OTH MAJOR CARDIOTHORACIC PROC W CARD CATH	S	\$1,822.67	\$3,182.88	\$10,757.43
105	CARDIAC VALVE & OTH MAJOR CARDIOTHORACIC PROC W/O CARD CATH	S	\$1,697.27	\$3,163.98	\$11,949.43
106	CORONARY BYPASS W PTCA	S	\$1,297.49	\$2,570.11	\$12,406.85

TABLE A. — ACUTE INPATIENT FACILITY NATIONWIDE  
PER DIEM CHARGES, BY DRG (DIAGNOSIS RELATED GROUP)

		Per Diem Charge
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DRG	Description	Surgical/Non-Surgical Indicator	Standard Room and Board	ICU Room and Board	Ancillary
108	OTHER CARDIOTHORACIC PROCEDURES	S	\$1,559.51	\$2,801.57	\$10,245.75
110	MAJOR CARDIOVASCULAR PROCEDURES W CC	S	\$1,360.91	\$2,607.13	\$7,846.72
111	MAJOR CARDIOVASCULAR PROCEDURES W/O CC	S	\$1,429.81	\$2,773.39	\$14,038.19
113	AMPUTATION FOR CIRC SYSTEM DISORDERS EXCEPT UPPER LIMB & TOE	S	\$1,168.95	\$2,260.69	\$3,101.33
114	UPPER LIMB & TOE AMPUTATION FOR CIRC SYSTEM DISORDERS	S	\$1,316.65	\$2,432.63	\$2,876.94
117	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT	S	\$1,236.08	\$2,111.98	\$4,615.41
118	CARDIAC PACEMAKER DEVICE REPLACEMENT	S	\$1,908.21	\$2,760.98	\$11,977.72
119	VEIN LIGATION & STRIPPING	S	\$1,596.57	\$3,143.22	\$4,102.31
120	OTHER CIRCULATORY SYSTEM O.R. PROCEDURES	S	\$1,482.69	\$2,701.63	\$4,186.12
121	CIRCULATORY DISORDERS W AMI & MAJOR COMP, DISCHARGED ALIVE	N	\$1,254.03	\$2,237.52	\$3,140.13
122	CIRCULATORY DISORDERS W AMI W/O MAJOR COMP, DISCHARGED ALIVE	N	\$1,218.74	\$2,246.40	\$3,900.29
123	CIRCULATORY DISORDERS W AMI, EXPIRED	N	\$1,328.31	\$2,568.95	\$4,642.01
124	CIRCULATORY DISORDERS EXCEPT AMI, W CARD CATH & COMPLEX DIAG	N	\$1,380.08	\$2,234.18	\$5,334.81
125	CIRCULATORY DISORDERS EXCEPT AMI, W CARD CATH W/O COMPLEX DIAG	N	\$1,326.72	\$2,070.83	\$6,995.90
126	ACUTE & SUBACUTE ENDOCARDITIS	N	\$1,398.10	\$2,430.34	\$2,946.72
127	HEART FAILURE & SHOCK	N	\$1,157.59	\$2,102.30	\$2,425.32
128	DEEP VEIN THROMBOPHLEBITIS	N	\$1,129.35	\$2,030.99	\$1,561.80
129	CARDIAC ARREST, UNEXPLAINED	N	\$1,075.53	\$2,506.01	\$5,725.17
130	PERIPHERAL VASCULAR DISORDERS W CC	N	\$1,193.23	\$2,295.58	\$2,084.17
131	PERIPHERAL VASCULAR DISORDERS W/O CC	N	\$1,101.28	\$2,085.67	\$1,619.28
132	ATHEROSCLEROSIS W CC	N	\$1,125.82	\$2,115.75	\$2,745.56
133	ATHEROSCLEROSIS W/O CC	N	\$1,233.02	\$2,216.45	\$2,370.76
134	HYPERTENSION	N	\$1,111.72	\$1,925.80	\$2,307.11
135	CARDIAC CONGENITAL & VALVULAR DISORDERS AGE >17 W CC	N	\$1,304.48	\$2,390.44	\$2,472.02
136	CARDIAC CONGENITAL & VALVULAR DISORDERS AGE >17 W/O CC	N	\$1,420.66	\$2,593.93	\$2,522.83
137	CARDIAC CONGENITAL & VALVULAR DISORDERS AGE 0-17	N	\$1,269.14	\$2,347.38	\$2,306.72
138	CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W CC	N	\$1,208.57	\$2,024.99	\$2,631.64
139	CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W/O CC	N	\$1,276.29	\$2,089.09	\$2,773.87
140	ANGINA PECTORIS	N	\$1,043.09	\$2,004.70	\$2,802.04
141	SYNCOPE & COLLAPSE W CC	N	\$1,404.03	\$2,291.53	\$2,895.98
142	SYNCOPE & COLLAPSE W/O CC	N	\$1,519.69	\$2,429.35	\$3,269.74
143	CHEST PAIN	N	\$1,321.54	\$2,155.16	\$4,090.27
144	OTHER CIRCULATORY SYSTEM DIAGNOSES W CC	N	\$1,249.03	\$2,276.99	\$3,103.33
145	OTHER CIRCULATORY SYSTEM DIAGNOSES W/O CC	N	\$1,244.15	\$2,273.21	\$2,815.86
146	RECTAL RESECTION W CC	S	\$1,283.18	\$2,547.50	\$4,223.71
147	RECTAL RESECTION W/O CC	S	\$1,331.33	\$2,849.07	\$4,373.37
148	MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	S	\$1,175.17	\$2,442.33	\$4,236.95
149	MAJOR SMALL & LARGE BOWEL PROCEDURES W/O CC	S	\$1,208.94	\$2,498.11	\$3,900.29
150	PERITONEAL ADHESIOLYSIS W CC	S	\$1,169.31	\$2,421.25	\$3,915.28
151	PERITONEAL ADHESIOLYSIS W/O CC	S	\$1,164.64	\$2,456.00	\$3,947.44
152	MINOR SMALL & LARGE BOWEL PROCEDURES W CC	S	\$1,202.99	\$2,572.76	\$3,578.62
153	MINOR SMALL & LARGE BOWEL PROCEDURES W/O CC	S	\$1,193.24	\$2,344.81	\$3,419.84
154	STOMACH, ESOPHAGEAL & DUODENAL PROCEDURES AGE >17 W CC	S	\$1,258.36	\$2,722.89	\$4,952.39
155	STOMACH, ESOPHAGEAL & DUODENAL PROCEDURES AGE >17 W/O CC	S	\$1,113.93	\$2,409.45	\$5,339.45
156	STOMACH, ESOPHAGEAL & DUODENAL PROCEDURES AGE 0-17	S	\$2,165.28	\$3,515.74	\$6,028.07
157	ANAL & STOMAL PROCEDURES W CC	S	\$1,173.51	\$2,324.70	\$3,469.06
158	ANAL & STOMAL PROCEDURES W/O CC	S	\$1,098.27	\$2,096.80	\$4,024.86
159	HERNIA PROCEDURES EXCEPT INGUINAL & FEMORAL AGE >17 W CC	S	\$1,189.59	\$2,351.81	\$4,430.97
160	HERNIA PROCEDURES EXCEPT INGUINAL & FEMORAL AGE >17 W/O CC	S	\$1,206.85	\$2,198.05	\$5,433.49
161	INGUINAL & FEMORAL HERNIA PROCEDURES AGE >17 W CC	S	\$1,280.68	\$2,452.64	\$4,351.34
162	INGUINAL & FEMORAL HERNIA PROCEDURES AGE >17 W/O CC	S	\$1,394.61	\$2,212.26	\$6,034.94
163	HERNIA PROCEDURES AGE 0-17	S	\$2,115.97	\$4,827.31	\$9,189.07

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			Per Diem Charge
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DRG	Description	Surgical/Non-Surgical Indicator	Standard Room and Board	ICU Room and Board	Ancillary
164	APPENDECTOMY W COMPLICATED PRINCIPAL DIAG W CC	S	\$1,150.60	\$2,318.17	\$4,340.84
165	APPENDECTOMY W COMPLICATED PRINCIPAL DIAG W/O CC	S	\$1,205.30	\$2,250.31	\$4,706.89
166	APPENDECTOMY W/O COMPLICATED PRINCIPAL DIAG W CC	S	\$1,199.78	\$2,251.39	\$5,301.09
167	APPENDECTOMY W/O COMPLICATED PRINCIPAL DIAG W/O CC	S	\$1,315.16	\$2,133.02	\$7,400.60
168	MOUTH PROCEDURES W CC	S	\$1,587.53	\$3,285.34	\$4,889.61
169	MOUTH PROCEDURES W/O CC	S	\$1,668.53	\$3,118.05	\$7,699.32
170	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES W CC	S	\$1,295.43	\$2,499.20	\$3,968.03
171	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES W/O CC	S	\$1,220.72	\$2,523.85	\$4,626.32
172	DIGESTIVE MALIGNANCY W CC	N	\$1,424.21	\$2,613.24	\$2,840.92
173	DIGESTIVE MALIGNANCY W/O CC	N	\$1,528.25	\$2,727.30	\$3,085.60
174	G.I. HEMORRHAGE W CC	N	\$1,162.80	\$2,288.36	\$2,827.44
175	G.I. HEMORRHAGE W/O CC	N	\$1,249.82	\$2,331.63	\$2,697.85
176	COMPLICATED PEPTIC ULCER	N	\$1,229.67	\$2,355.71	\$3,059.15
177	UNCOMPLICATED PEPTIC ULCER W CC	N	\$1,047.18	\$1,879.94	\$2,707.30
178	UNCOMPLICATED PEPTIC ULCER W/O CC	N	\$1,112.71	\$1,985.75	\$3,101.54
179	INFLAMMATORY BOWEL DISEASE	N	\$1,214.35	\$2,239.20	\$2,456.99
180	G.I. OBSTRUCTION W CC	N	\$1,121.27	\$2,130.73	\$2,318.63
181	G.I. OBSTRUCTION W/O CC	N	\$1,133.54	\$2,112.31	\$2,124.98
182	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W CC	N	\$1,098.77	\$1,982.95	\$2,412.94
183	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W/O CC	N	\$1,133.45	\$1,891.76	\$2,752.90
184	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE 0-17	N	\$1,831.01	\$4,229.64	\$4,254.12
185	DENTAL & ORAL DIS EXCEPT EXTRACTIONS & RESTORATIONS, AGE >17	N	\$1,294.69	\$2,444.61	\$2,911.09
186	DENTAL & ORAL DIS EXCEPT EXTRACTIONS & RESTORATIONS, AGE 0-17	N	\$1,261.51	\$2,501.53	\$2,577.70
187	DENTAL EXTRACTIONS & RESTORATIONS	N	\$1,349.46	\$2,097.32	\$2,554.01
188	OTHER DIGESTIVE SYSTEM DIAGNOSES AGE >17 W CC	N	\$1,292.86	\$2,426.02	\$2,881.30
189	OTHER DIGESTIVE SYSTEM DIAGNOSES AGE >17 W/O CC	N	\$1,396.45	\$2,299.07	\$2,768.19
190	OTHER DIGESTIVE SYSTEM DIAGNOSES AGE 0-17	N	\$1,612.80	\$3,640.36	\$2,904.17
191	PANCREAS, LIVER & SHUNT PROCEDURES W CC	S	\$1,645.14	\$3,499.25	\$6,613.28
192	PANCREAS, LIVER & SHUNT PROCEDURES W/O CC	S	\$1,695.40	\$3,642.03	\$7,320.01
193	BILIARY TRACT PROC EXCEPT ONLY CHOLECYST W OR W/O C.D.E. W CC	S	\$1,311.77	\$2,689.15	\$4,395.55
194	BILIARY TRACT PROC EXCEPT ONLY CHOLECYST W OR W/O C.D.E. W/O CC	S	\$1,327.17	\$3,045.81	\$4,380.09
195	CHOLECYSTECTOMY W C.D.E. W CC	S	\$1,107.87	\$2,289.95	\$4,164.00
196	CHOLECYSTECTOMY W C.D.E. W/O CC	S	\$1,064.78	\$1,641.97	\$4,398.28
197	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE W/O C.D.E. W CC	S	\$1,137.00	\$2,304.79	\$4,131.91
198	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE W/O C.D.E. W/O CC	S	\$1,040.18	\$2,323.54	\$3,949.57
199	HEPATOBIILIARY DIAGNOSTIC PROCEDURE FOR MALIGNANCY	S	\$1,622.01	\$3,158.04	\$5,045.98
200	HEPATOBIILIARY DIAGNOSTIC PROCEDURE FOR NON-MALIGNANCY	S	\$1,263.49	\$2,538.65	\$4,613.56
201	OTHER HEPATOBIILIARY OR PANCREAS O.R. PROCEDURES	S	\$1,414.45	\$2,570.51	\$4,319.33
202	CIRRHOSIS & ALCOHOLIC HEPATITIS	N	\$1,352.04	\$2,652.70	\$3,253.83
203	MALIGNANCY OF HEPATOBIILIARY SYSTEM OR PANCREAS	N	\$1,438.82	\$2,721.73	\$3,173.91
204	DISORDERS OF PANCREAS EXCEPT MALIGNANCY	N	\$1,099.36	\$2,111.64	\$2,883.22
205	DISORDERS OF LIVER EXCEPT MALIG,CIRR,ALC HEPA W CC	N	\$1,356.71	\$2,687.63	\$3,081.90
206	DISORDERS OF LIVER EXCEPT MALIG,CIRR,ALC HEPA W/O CC	N	\$1,254.06	\$2,831.52	\$2,548.09
207	DISORDERS OF THE BILIARY TRACT W CC	N	\$1,208.23	\$2,236.34	\$3,180.90
208	DISORDERS OF THE BILIARY TRACT W/O CC	N	\$1,254.29	\$1,842.42	\$3,350.65
210	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE >17 W CC	S	\$1,159.60	\$2,280.47	\$4,096.52
211	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE >17 W/O CC	S	\$1,220.99	\$2,394.19	\$4,224.44
212	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE 0-17	S	\$1,242.39	\$2,402.06	\$4,224.88
213	AMPUTATION FOR MUSCULOSKELETAL SYSTEM & CONN TISSUE DISORDERS	S	\$1,136.63	\$2,145.53	\$2,995.79
216	BIOPSIES OF MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE	S	\$1,201.88	\$2,292.94	\$4,658.56
217	WND DEBRID & SKN GRFT EXCEPT HAND, FOR MUSCULOSKELET & CONN TISS DIS	S	\$1,361.88	\$2,813.68	\$3,432.90
218	LOWER EXTREM & HUMER PROC EXCEPT HIP, FOOT, FEMUR AGE >17 W CC	S	\$1,184.75	\$2,306.46	\$4,737.56

TABLE A. — ACUTE INPATIENT FACILITY NATIONWIDE  
PER DIEM CHARGES, BY DRG (DIAGNOSIS RELATED GROUP)

			Per Diem Charge
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DRG	Description	Surgical/Non-Surgical Indicator	Standard Room and Board	ICU Room and Board	Ancillary
219	LOWER EXTREM & HUMER PROC EXCEPT HIP,FOOT,FEMUR AGE >17 W/O CC	S	\$1,197.21	\$2,417.52	\$5,714.24
220	LOWER EXTREM & HUMER PROC EXCEPT HIP,FOOT,FEMUR AGE 0-17	S	\$1,486.10	\$3,074.37	\$6,078.99
223	MAJOR SHOULDER/ELBOW PROC, OR OTHER UPPER EXTREMITY PROC W CC	S	\$1,201.28	\$2,308.16	\$6,276.93
224	SHOULDER,ELBOW OR FOREARM PROC,EXC MAJOR JOINT PROC, W/O CC	S	\$1,190.14	\$2,270.84	\$7,732.53
225	FOOT PROCEDURES	S	\$1,236.05	\$2,157.30	\$3,427.19
226	SOFT TISSUE PROCEDURES W CC	S	\$1,267.43	\$2,526.81	\$3,767.89
227	SOFT TISSUE PROCEDURES W/O CC	S	\$1,404.37	\$2,983.14	\$6,316.12
228	MAJOR THUMB OR JOINT PROC,OR OTH HAND OR WRIST PROC W CC	S	\$1,324.82	\$2,774.48	\$5,138.33
229	HAND OR WRIST PROC, EXCEPT MAJOR JOINT PROC, W/O CC	S	\$1,550.10	\$2,642.91	\$5,970.34
230	LOCAL EXCISION & REMOVAL OF INT FIX DEVICES OF HIP & FEMUR	S	\$1,193.11	\$2,467.94	\$3,971.51
232	ARTHROSCOPY	S	\$1,254.39	\$1,407.85	\$5,082.77
233	OTHER MUSCULOSKELET SYS & CONN TISS O.R. PROC W CC	S	\$1,169.78	\$2,429.92	\$4,054.17
234	OTHER MUSCULOSKELET SYS & CONN TISS O.R. PROC W/O CC	S	\$1,196.71	\$2,427.49	\$6,357.74
235	FRACTURES OF FEMUR	N	\$1,098.68	\$2,544.77	\$1,658.05
236	FRACTURES OF HIP & PELVIS	N	\$1,090.43	\$2,578.52	\$1,534.27
237	SPRAINS, STRAINS, & DISLOCATIONS OF HIP, PELVIS & THIGH	N	\$1,250.87	\$2,649.88	\$1,906.90
238	OSTEOMYELITIS	N	\$1,252.97	\$2,599.58	\$1,905.59
239	PATHOLOGICAL FRACTURES & MUSCULOSKELETAL & CONN TISS MALIGNANCY	N	\$1,212.64	\$2,308.87	\$2,000.61
240	CONNECTIVE TISSUE DISORDERS W CC	N	\$1,237.58	\$2,503.29	\$2,865.49
241	CONNECTIVE TISSUE DISORDERS W/O CC	N	\$1,367.37	\$2,694.15	\$2,363.97
242	SEPTIC ARTHRITIS	N	\$1,186.30	\$2,246.00	\$1,910.59
243	MEDICAL BACK PROBLEMS	N	\$1,121.88	\$2,254.36	\$1,908.17
244	BONE DISEASES & SPECIFIC ARTHROPATHIES W CC	N	\$1,037.21	\$2,376.51	\$1,403.08
245	BONE DISEASES & SPECIFIC ARTHROPATHIES W/O CC	N	\$1,024.00	\$2,365.11	\$1,095.75
246	NON-SPECIFIC ARTHROPATHIES	N	\$1,066.55	\$2,328.57	\$1,279.88
247	SIGNS & SYMPTOMS OF MUSCULOSKELETAL SYSTEM & CONN TISSUE	N	\$1,157.94	\$1,983.77	\$1,999.15
248	TENDONITIS, MYOSITIS & BURSITIS	N	\$1,259.13	\$2,541.65	\$2,141.95
249	AFTERCARE, MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE	N	\$1,183.15	\$2,415.86	\$1,709.71
250	FX, SPRN, STRN & DISL OF FOREARM, HAND, FOOT AGE >17 W CC	N	\$1,280.52	\$2,558.68	\$1,992.28
251	FX, SPRN, STRN & DISL OF FOREARM, HAND, FOOT AGE >17 W/O CC	N	\$1,343.11	\$2,662.29	\$2,024.96
252	FX, SPRN, STRN & DISL OF FOREARM, HAND, FOOT AGE 0-17	N	\$1,218.52	\$2,453.49	\$1,788.14
253	FX, SPRN, STRN & DISL OF UPARM,LOWLEG EX FOOT AGE >17 W CC	N	\$1,200.70	\$2,564.96	\$1,902.97
254	FX, SPRN, STRN & DISL OF UPARM,LOWLEG EX FOOT AGE >17 W/O CC	N	\$1,198.14	\$2,626.29	\$1,534.99
255	FX, SPRN, STRN & DISL OF UPARM,LOWLEG EX FOOT AGE 0-17	N	\$1,173.33	\$2,299.88	\$1,600.64
256	OTHER MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE DIAGNOSES	N	\$1,161.77	\$2,430.47	\$1,786.86
257	TOTAL MASTECTOMY FOR MALIGNANCY W CC	S	\$1,259.16	\$2,284.83	\$6,157.12
258	TOTAL MASTECTOMY FOR MALIGNANCY W/O CC	S	\$1,202.60	\$2,135.74	\$7,504.11
259	SUBTOTAL MASTECTOMY FOR MALIGNANCY W CC	S	\$1,510.40	\$2,508.87	\$6,359.31
260	SUBTOTAL MASTECTOMY FOR MALIGNANCY W/O CC	S	\$1,456.32	\$3,043.62	\$10,047.78
261	BREAST PROC FOR NON-MALIGNANCY EXCEPT BIOPSY & LOCAL EXCISION	S	\$1,492.29	\$3,705.00	\$9,058.98
262	BREAST BIOPSY & LOCAL EXCISION FOR NON-MALIGNANCY	S	\$1,434.94	\$2,002.28	\$3,663.30
263	SKIN GRAFT &/OR DEBRID FOR SKN ULCER OR CELLULITIS W CC	S	\$1,251.91	\$2,523.36	\$2,363.88
264	SKIN GRAFT &/OR DEBRID FOR SKN ULCER OR CELLULITIS W/O CC	S	\$1,258.16	\$1,709.04	\$2,117.91
265	SKIN GRAFT &/OR DEBRID EXCEPT FOR SKIN ULCER OR CELLULITIS W CC	S	\$1,454.27	\$3,037.42	\$4,282.09
266	SKIN GRAFT &/OR DEBRID EXCEPT FOR SKIN ULCER OR CELLULITIS W/O CC	S	\$1,689.68	\$3,860.74	\$6,051.98
267	PERIANAL & PILONIDAL PROCEDURES	S	\$1,320.31	\$2,203.73	\$3,475.36
268	SKIN, SUBCUTANEOUS TISSUE & BREAST PLASTIC PROCEDURES	S	\$1,527.58	\$4,162.50	\$7,181.01
269	OTHER SKIN, SUBCUT TISS & BREAST PROC W CC	S	\$1,219.40	\$2,226.23	\$2,882.64
270	OTHER SKIN, SUBCUT TISS & BREAST PROC W/O CC	S	\$1,313.75	\$2,108.18	\$3,861.68
271	SKIN ULCERS	N	\$1,142.39	\$2,169.35	\$1,665.07
272	MAJOR SKIN DISORDERS W CC	N	\$1,301.67	\$2,817.45	\$2,359.68
273	MAJOR SKIN DISORDERS W/O CC	N	\$1,283.66	\$2,913.67	\$2,325.75

TABLE A. — ACUTE INPATIENT FACILITY NATIONWIDE  
PER DIEM CHARGES, BY DRG (DIAGNOSIS RELATED GROUP)

			Per Diem Charge
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DRG	Description	Surgical/Non-Surgical Indicator	Standard Room and Board	ICU Room and Board	Ancillary
274	MALIGNANT BREAST DISORDERS W CC	N	\$1,244.36	\$2,231.12	\$2,114.70
275	MALIGNANT BREAST DISORDERS W/O CC	N	\$1,275.04	\$1,811.30	\$1,396.78
276	NON-MALIGNANT BREAST DISORDERS	N	\$1,272.70	\$2,189.75	\$1,977.57
277	CELLULITIS AGE >17 W CC	N	\$1,286.17	\$2,257.02	\$1,903.34
278	CELLULITIS AGE >17 W/O CC	N	\$1,262.61	\$2,130.20	\$1,552.01
279	CELLULITIS AGE 0-17	N	\$1,370.37	\$2,407.86	\$1,892.57
280	TRAUMA TO THE SKIN, SUBCUT TISS & BREAST AGE >17 W CC	N	\$1,266.62	\$2,440.02	\$2,305.17
281	TRAUMA TO THE SKIN, SUBCUT TISS & BREAST AGE >17 W/O CC	N	\$1,296.87	\$2,306.55	\$2,158.97
282	TRAUMA TO THE SKIN, SUBCUT TISS & BREAST AGE 0-17	N	\$1,284.46	\$2,487.48	\$2,044.07
283	MINOR SKIN DISORDERS W CC	N	\$1,342.16	\$2,393.25	\$2,123.33
284	MINOR SKIN DISORDERS W/O CC	N	\$1,048.59	\$1,877.39	\$1,346.79
285	AMPUTAT OF LOWER LIMB FOR ENDOCRINE,NUTRIT,& METABOL DISORDERS	S	\$1,245.29	\$2,492.24	\$2,744.67
286	ADRENAL & PITUITARY PROCEDURES	S	\$1,453.79	\$3,375.76	\$7,491.70
287	SKIN GRAFTS & WOUND DEBRID FOR ENDOC, NUTRIT & METAB DISORDERS	S	\$1,396.43	\$2,480.63	\$2,380.98
288	O.R. PROCEDURES FOR OBESITY	S	\$1,351.90	\$2,992.09	\$9,652.21
289	PARATHYROID PROCEDURES	S	\$1,371.52	\$2,909.21	\$6,767.62
290	THYROID PROCEDURES	S	\$1,427.67	\$2,704.69	\$8,186.74
291	THYROIDECTOMY PROCEDURES	S	\$1,779.26	\$7,619.61	\$10,756.97
292	OTHER ENDOCRINE, NUTRIT & METAB O.R. PROC W CC	S	\$1,398.88	\$2,484.10	\$3,835.57
293	OTHER ENDOCRINE, NUTRIT & METAB O.R. PROC W/O CC	S	\$1,410.21	\$3,617.81	\$5,745.31
294	DIABETES AGE >35	N	\$1,291.11	\$2,392.42	\$2,196.12
295	DIABETES AGE 0-35	N	\$1,044.68	\$2,003.19	\$2,600.92
296	NUTRITIONAL & MISC METABOLIC DISORDERS AGE >17 W CC	N	\$1,167.99	\$2,094.27	\$2,139.04
297	NUTRITIONAL & MISC METABOLIC DISORDERS AGE >17 W/O CC	N	\$1,131.89	\$2,051.65	\$1,814.38
298	NUTRITIONAL & MISC METABOLIC DISORDERS AGE 0-17	N	\$2,024.90	\$3,386.38	\$3,533.89
299	INBORN ERRORS OF METABOLISM	N	\$1,057.74	\$2,213.65	\$2,409.07
300	ENDOCRINE DISORDERS W CC	N	\$1,292.08	\$2,341.90	\$2,431.73
301	ENDOCRINE DISORDERS W/O CC	N	\$1,535.16	\$2,719.33	\$2,711.01
302	KIDNEY TRANSPLANT	S	\$2,004.32	\$4,076.46	\$18,926.78
303	KIDNEY,URETER & MAJOR BLADDER PROCEDURES FOR NEOPLASM	S	\$1,344.46	\$2,762.00	\$5,462.87
304	KIDNEY,URETER & MAJOR BLADDER PROC FOR NON-NEOPL W CC	S	\$1,431.45	\$2,748.35	\$4,764.52
305	KIDNEY,URETER & MAJOR BLADDER PROC FOR NON-NEOPL W/O CC	S	\$1,295.75	\$2,528.50	\$6,681.59
306	PROSTATECTOMY W CC	S	\$1,272.86	\$2,359.37	\$3,550.97
307	PROSTATECTOMY W/O CC	S	\$1,146.80	\$1,873.38	\$5,227.47
308	MINOR BLADDER PROCEDURES W CC	S	\$1,259.11	\$2,306.65	\$4,142.33
309	MINOR BLADDER PROCEDURES W/O CC	S	\$1,291.93	\$2,232.11	\$9,452.31
310	TRANSURETHRAL PROCEDURES W CC	S	\$1,384.79	\$2,469.51	\$4,240.60
311	TRANSURETHRAL PROCEDURES W/O CC	S	\$1,643.17	\$2,458.26	\$7,615.73
312	URETHRAL PROCEDURES, AGE >17 W CC	S	\$1,419.37	\$2,510.57	\$4,188.84
313	URETHRAL PROCEDURES, AGE >17 W/O CC	S	\$1,387.51	\$2,982.17	\$6,623.99
314	URETHRAL PROCEDURES, AGE 0-17	S	\$1,441.40	\$2,478.26	\$4,569.91
315	OTHER KIDNEY & URINARY TRACT O.R. PROCEDURES	S	\$1,405.23	\$2,495.21	\$4,862.50
316	RENAL FAILURE	N	\$1,220.38	\$2,239.96	\$2,642.79
317	ADMIT FOR RENAL DIALYSIS	N	\$1,177.40	\$2,238.22	\$3,790.67
318	KIDNEY & URINARY TRACT NEOPLASMS W CC	N	\$1,262.82	\$2,753.02	\$2,717.01
319	KIDNEY & URINARY TRACT NEOPLASMS W/O CC	N	\$1,238.47	\$2,478.55	\$2,743.00
320	KIDNEY & URINARY TRACT INFECTIONS AGE >17 W CC	N	\$1,155.64	\$2,125.26	\$2,103.19
321	KIDNEY & URINARY TRACT INFECTIONS AGE >17 W/O CC	N	\$1,109.12	\$2,041.34	\$1,888.31
322	KIDNEY & URINARY TRACT INFECTIONS AGE 0-17	N	\$1,364.29	\$3,625.23	\$2,309.82
323	URINARY STONES W CC, &/OR ESW LITHOTRIPSY	N	\$1,186.69	\$2,190.71	\$3,967.06
324	URINARY STONES W/O CC	N	\$1,037.72	\$2,365.02	\$3,681.85
325	KIDNEY & URINARY TRACT SIGNS & SYMPTOMS AGE >17 W CC	N	\$1,365.33	\$2,366.06	\$2,306.33

TABLE A. — ACUTE INPATIENT FACILITY NATIONWIDE  
PER DIEM CHARGES, BY DRG (DIAGNOSIS RELATED GROUP)

			Per Diem Charge
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DRG	Description	Surgical/Non-Surgical Indicator	Standard Room and Board	ICU Room and Board	Ancillary
326	KIDNEY & URINARY TRACT SIGNS & SYMPTOMS AGE >17 W/O CC	N	\$1,395.80	\$1,914.84	\$2,219.20
327	KIDNEY & URINARY TRACT SIGNS & SYMPTOMS AGE 0-17	N	\$1,356.08	\$2,410.20	\$2,083.07
328	URETHRAL STRICTURE AGE >17 W CC	N	\$1,516.23	\$2,111.13	\$3,363.34
329	URETHRAL STRICTURE AGE >17 W/O CC	N	\$1,412.47	\$2,962.26	\$4,394.67
330	URETHRAL STRICTURE AGE 0-17	N	\$1,602.14	\$3,357.92	\$3,381.59
331	OTHER KIDNEY & URINARY TRACT DIAGNOSES AGE >17 W CC	N	\$1,259.74	\$2,310.35	\$2,838.57
332	OTHER KIDNEY & URINARY TRACT DIAGNOSES AGE >17 W/O CC	N	\$1,358.57	\$2,145.06	\$2,930.44
333	OTHER KIDNEY & URINARY TRACT DIAGNOSES AGE 0-17	N	\$2,106.48	\$4,358.89	\$5,373.88
334	MAJOR MALE PELVIC PROCEDURES W CC	S	\$1,270.08	\$2,746.77	\$6,163.42
335	MAJOR MALE PELVIC PROCEDURES W/O CC	S	\$1,259.36	\$2,582.29	\$7,686.43
336	TRANSURETHRAL PROSTATECTOMY W CC	S	\$1,186.16	\$2,362.96	\$4,007.10
337	TRANSURETHRAL PROSTATECTOMY W/O CC	S	\$1,193.74	\$2,043.55	\$5,299.96
338	TESTES PROCEDURES, FOR MALIGNANCY	S	\$1,012.46	\$1,630.37	\$3,317.10
339	TESTES PROCEDURES, NON-MALIGNANCY AGE >17	S	\$1,143.71	\$2,315.94	\$3,449.72
340	TESTES PROCEDURES, NON-MALIGNANCY AGE 0-17	S	\$1,180.80	\$2,488.87	\$3,571.63
341	PENIS PROCEDURES	S	\$1,655.21	\$3,321.78	\$10,351.87
342	CIRCUMCISION AGE >17	S	\$996.95	\$1,711.44	\$3,710.07
343	CIRCUMCISION AGE 0-17	S	\$1,020.87	\$1,904.56	\$4,036.38
344	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROCEDURES FOR MALIGNANCY	S	\$1,742.74	\$3,174.35	\$11,889.67
345	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC EXCEPT FOR MALIGNANCY	S	\$1,410.15	\$2,751.60	\$3,348.47
346	MALIGNANCY, MALE REPRODUCTIVE SYSTEM, W CC	N	\$1,237.42	\$2,181.90	\$2,138.47
347	MALIGNANCY, MALE REPRODUCTIVE SYSTEM, W/O CC	N	\$1,417.51	\$2,129.17	\$3,259.15
348	BENIGN PROSTATIC HYPERTROPHY W CC	N	\$1,345.81	\$2,302.61	\$2,415.31
349	BENIGN PROSTATIC HYPERTROPHY W/O CC	N	\$1,422.72	\$2,261.19	\$2,192.28
350	INFLAMMATION OF THE MALE REPRODUCTIVE SYSTEM	N	\$1,138.22	\$1,979.44	\$2,201.96
351	STERILIZATION, MALE	N	\$1,036.28	\$2,008.41	\$2,847.60
352	OTHER MALE REPRODUCTIVE SYSTEM DIAGNOSES	N	\$1,234.33	\$2,894.76	\$2,642.17
353	PELVIC EVISCERATION, RADICAL HYSTERECTOMY & RADICAL VULVECTOMY	S	\$1,439.81	\$3,166.27	\$5,511.26
354	UTERINE,ADNEXA PROC FOR NON-OVARIAN/ADNEXAL MALIG W CC	S	\$1,434.65	\$2,855.05	\$4,731.06
355	UTERINE,ADNEXA PROC FOR NON-OVARIAN/ADNEXAL MALIG W/O CC	S	\$1,400.75	\$2,952.77	\$5,433.31
356	FEMALE REPRODUCTIVE SYSTEM RECONSTRUCTIVE PROCEDURES	S	\$1,089.39	\$2,304.80	\$7,014.72
357	UTERINE & ADNEXA PROC FOR OVARIAN OR ADNEXAL MALIGNANCY	S	\$1,402.48	\$2,895.77	\$4,867.33
358	UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W CC	S	\$1,155.86	\$2,504.06	\$4,903.23
359	UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	S	\$1,116.70	\$2,289.33	\$5,764.97
360	VAGINA, CERVIX & VULVA PROCEDURES	S	\$1,110.03	\$2,242.50	\$5,618.23
361	LAPAROSCOPY & INCISIONAL TUBAL INTERRUPTION	S	\$1,286.14	\$2,527.44	\$6,378.25
362	ENDOSCOPIC TUBAL INTERRUPTION	S	\$1,023.96	\$2,071.53	\$4,936.39
363	D&C, CONIZATION & RADIO-IMPLANT, FOR MALIGNANCY	S	\$1,375.49	\$2,297.11	\$4,058.50
364	D&C, CONIZATION EXCEPT FOR MALIGNANCY	S	\$1,563.99	\$2,902.74	\$3,012.32
365	OTHER FEMALE REPRODUCTIVE SYSTEM O.R. PROCEDURES	S	\$1,227.05	\$2,612.53	\$4,183.05
366	MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM W CC	N	\$1,292.22	\$2,313.46	\$2,453.62
367	MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM W/O CC	N	\$1,341.02	\$4,765.54	\$2,069.35
368	INFECTIONS, FEMALE REPRODUCTIVE SYSTEM	N	\$1,177.36	\$2,203.72	\$2,366.54
369	MENSTRUAL & OTHER FEMALE REPRODUCTIVE SYSTEM DISORDERS	N	\$1,436.54	\$2,811.91	\$2,691.73
370	CESAREAN SECTION W CC	S	\$1,228.17	\$3,013.70	\$3,951.65
371	CESAREAN SECTION W/O CC	S	\$1,209.90	\$2,417.57	\$2,935.70
372	VAGINAL DELIVERY W COMPLICATING DIAGNOSES	N	\$1,216.49	\$2,391.09	\$2,528.75
373	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	N	\$1,216.41	\$2,186.33	\$2,735.19
374	VAGINAL DELIVERY W STERILIZATION &/OR D&C	S	\$1,244.56	\$1,841.63	\$4,743.42
375	VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C	S	\$567.29	\$1,147.67	\$2,734.86
376	POSTPARTUM & POST ABORTION DIAGNOSES W/O O.R. PROCEDURE	N	\$1,264.68	\$3,125.53	\$1,597.60
377	POSTPARTUM & POST ABORTION DIAGNOSES W O.R. PROCEDURE	S	\$1,123.19	\$1,443.83	\$3,824.87

TABLE A. — ACUTE INPATIENT FACILITY NATIONWIDE  
PER DIEM CHARGES, BY DRG (DIAGNOSIS RELATED GROUP)

			Per Diem Charge
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DRG	Description	Surgical/Non-Surgical Indicator	Standard Room and Board	ICU Room and Board	Ancillary
378	ECTOPIC PREGNANCY	N	\$1,186.65	\$2,896.18	\$7,150.85
379	THREATENED ABORTION	N	\$1,389.78	\$2,688.39	\$1,987.30
380	ABORTION W/O D&C	N	\$1,127.18	\$2,381.87	\$3,064.94
381	ABORTION W D&C, ASPIRATION CURETTAGE OR HYSTEROTOMY	S	\$2,000.08	\$1,675.04	\$5,215.31
382	FALSE LABOR	N	\$1,115.53	\$1,886.18	\$1,705.14
383	OTHER ANTEPARTUM DIAGNOSES W MEDICAL COMPLICATIONS	N	\$1,372.26	\$2,186.89	\$1,694.58
384	OTHER ANTEPARTUM DIAGNOSES W/O MEDICAL COMPLICATIONS	N	\$1,312.70	\$1,619.83	\$2,461.65
385	NEONATES, DIED OR TRANSFERRED TO ANOTHER ACUTE CARE FACILITY	N	\$1,999.50	\$3,674.33	\$3,654.47
386	EXTREME IMMATURETY OR RESPIRATORY DISTRESS SYNDROME, NEONATE	N	\$1,787.22	\$3,284.23	\$3,266.47
387	PREMATURITY W MAJOR PROBLEMS	N	\$1,588.29	\$2,918.69	\$2,902.91
388	PREMATURITY W/O MAJOR PROBLEMS	N	\$1,012.52	\$1,860.62	\$1,850.57
389	FULL TERM NEONATE W MAJOR PROBLEMS	N	\$1,467.20	\$3,230.18	\$1,131.57
390	NEONATE W OTHER SIGNIFICANT PROBLEMS	N	\$921.90	\$1,694.09	\$1,684.92
391	NORMAL NEWBORN	N	\$342.97	\$630.25	\$626.84
392	SPLENECTOMY AGE >17	S	\$1,171.20	\$2,615.97	\$5,412.20
393	SPLENECTOMY AGE 0-17	S	\$1,068.56	\$2,306.83	\$5,482.59
394	OTHER O.R. PROCEDURES OF THE BLOOD AND BLOOD FORMING ORGANS	S	\$1,555.78	\$2,873.29	\$4,417.32
395	RED BLOOD CELL DISORDERS AGE >17	N	\$1,238.16	\$2,220.54	\$2,735.18
396	RED BLOOD CELL DISORDERS AGE 0-17	N	\$2,208.52	\$6,460.79	\$9,840.69
397	COAGULATION DISORDERS	N	\$1,263.92	\$2,353.17	\$4,194.79
398	RETICULOENDOTHELIAL & IMMUNITY DISORDERS W CC	N	\$1,312.61	\$2,405.61	\$3,381.04
399	RETICULOENDOTHELIAL & IMMUNITY DISORDERS W/O CC	N	\$1,336.94	\$2,363.83	\$3,145.53
401	LYMPHOMA & NON-ACUTE LEUKEMIA W OTHER O.R. PROC W CC	S	\$1,424.00	\$2,645.49	\$4,268.28
402	LYMPHOMA & NON-ACUTE LEUKEMIA W OTHER O.R. PROC W/O CC	S	\$1,372.97	\$2,965.99	\$5,224.67
403	LYMPHOMA & NON-ACUTE LEUKEMIA W CC	N	\$1,361.99	\$2,493.25	\$3,520.36
404	LYMPHOMA & NON-ACUTE LEUKEMIA W/O CC	N	\$1,649.15	\$2,934.79	\$3,982.08
405	ACUTE LEUKEMIA W/O MAJOR O.R. PROCEDURE AGE 0-17	N	\$1,427.20	\$2,838.84	\$4,666.34
406	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W MAJ O.R.PROC W CC	S	\$1,470.04	\$2,949.60	\$4,706.45
407	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W MAJ O.R.PROC W/O CC	S	\$1,459.41	\$2,897.34	\$5,923.85
408	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W OTHER O.R.PROC	S	\$1,424.59	\$2,819.24	\$4,811.47
409	RADIOTHERAPY	N	\$2,195.92	\$4,438.31	\$3,846.94
410	CHEMOTHERAPY W/O ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS	N	\$1,794.54	\$3,236.46	\$5,942.33
411	HISTORY OF MALIGNANCY W/O ENDOSCOPY	N	\$1,220.72	\$1,220.72	\$3,124.13
412	HISTORY OF MALIGNANCY W ENDOSCOPY	N	\$3,228.42	\$1,191.82	\$8,323.84
413	OTHER MYELOPROLIF DIS OR POORLY DIFF NEOPL DIAG W CC	N	\$1,274.69	\$2,532.41	\$2,653.68
414	OTHER MYELOPROLIF DIS OR POORLY DIFF NEOPL DIAG W/O CC	N	\$1,215.88	\$2,918.43	\$2,398.13
415	O.R. PROCEDURE FOR INFECTIOUS & PARASITIC DISEASES	S	\$1,332.56	\$2,561.38	\$3,717.51
416	SEPTICEMIA AGE >17	N	\$1,245.71	\$2,391.86	\$2,790.37
417	SEPTICEMIA AGE 0-17	N	\$1,674.93	\$5,731.40	\$6,493.04
418	POSTOPERATIVE & POST-TRAUMATIC INFECTIONS	N	\$1,259.31	\$2,334.44	\$2,288.68
419	FEVER OF UNKNOWN ORIGIN AGE >17 W CC	N	\$1,321.53	\$2,274.27	\$2,793.41
420	FEVER OF UNKNOWN ORIGIN AGE >17 W/O CC	N	\$1,354.51	\$2,363.06	\$2,647.39
421	VIRAL ILLNESS AGE >17	N	\$1,181.23	\$2,159.18	\$2,722.42
422	VIRAL ILLNESS & FEVER OF UNKNOWN ORIGIN AGE 0-17	N	\$1,536.83	\$2,837.80	\$3,877.58
423	OTHER INFECTIOUS & PARASITIC DISEASES DIAGNOSES	N	\$1,209.08	\$2,444.68	\$3,105.57
424	O.R. PROCEDURE W PRINCIPAL DIAGNOSES OF MENTAL ILLNESS	S	\$1,508.34	\$2,444.26	\$1,635.67
425	ACUTE ADJUSTMENT REACTION & PSYCHOSOCIAL DYSFUNCTION	N	\$1,197.34	\$2,028.17	\$1,521.09
426	DEPRESSIVE NEUROSES	N	\$1,297.97	\$1,680.82	\$549.88
427	NEUROSES EXCEPT DEPRESSIVE	N	\$1,229.26	\$1,890.05	\$473.55
428	DISORDERS OF PERSONALITY & IMPULSE CONTROL	N	\$1,106.85	\$1,638.61	\$359.08
429	ORGANIC DISTURBANCES & MENTAL RETARDATION	N	\$1,245.35	\$1,919.63	\$678.52
430	PSYCHOSES	N	\$1,187.84	\$1,650.58	\$362.83

TABLE A. — ACUTE INPATIENT FACILITY NATIONWIDE  
PER DIEM CHARGES, BY DRG (DIAGNOSIS RELATED GROUP)

			Per Diem Charge
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DRG	Description	Surgical/Non-Surgical Indicator	Standard Room and Board	ICU Room and Board	Ancillary
431	CHILDHOOD MENTAL DISORDERS	N	\$893.52	\$1,661.39	\$236.11
432	OTHER MENTAL DISORDER DIAGNOSES	N	\$1,019.65	\$1,624.44	\$291.19
433	ALCOHOL/DRUG ABUSE OR DEPENDENCE, LEFT AMA	N	\$1,526.39	\$2,869.59	\$892.84
439	SKIN GRAFTS FOR INJURIES	S	\$1,302.52	\$2,998.99	\$3,500.47
440	WOUND DEBRIDEMENTS FOR INJURIES	S	\$1,236.54	\$2,657.63	\$3,162.77
441	HAND PROCEDURES FOR INJURIES	S	\$1,094.93	\$2,401.59	\$4,853.93
442	OTHER O.R. PROCEDURES FOR INJURIES W CC	S	\$1,219.82	\$2,538.57	\$4,522.22
443	OTHER O.R. PROCEDURES FOR INJURIES W/O CC	S	\$1,296.27	\$2,554.06	\$5,680.26
444	TRAUMATIC INJURY AGE >17 W CC	N	\$1,225.29	\$2,709.96	\$2,323.40
445	TRAUMATIC INJURY AGE >17 W/O CC	N	\$1,281.26	\$3,095.53	\$2,058.86
446	TRAUMATIC INJURY AGE 0-17	N	\$1,143.91	\$2,425.79	\$1,881.90
447	ALLERGIC REACTIONS AGE >17	N	\$1,284.44	\$2,564.76	\$2,978.04
448	ALLERGIC REACTIONS AGE 0-17	N	\$1,241.33	\$2,444.08	\$2,462.12
449	POISONING & TOXIC EFFECTS OF DRUGS AGE >17 W CC	N	\$1,313.64	\$2,503.46	\$3,275.55
450	POISONING & TOXIC EFFECTS OF DRUGS AGE >17 W/O CC	N	\$1,281.21	\$2,306.29	\$2,858.01
451	POISONING & TOXIC EFFECTS OF DRUGS AGE 0-17	N	\$862.60	\$1,643.66	\$1,856.32
452	COMPLICATIONS OF TREATMENT W CC	N	\$1,278.45	\$2,517.40	\$2,983.15
453	COMPLICATIONS OF TREATMENT W/O CC	N	\$1,252.70	\$2,491.54	\$2,608.74
454	OTHER INJURY, POISONING & TOXIC EFFECT DIAG W CC	N	\$1,240.12	\$2,447.60	\$2,516.23
455	OTHER INJURY, POISONING & TOXIC EFFECT DIAG W/O CC	N	\$1,381.54	\$2,488.02	\$2,873.73
461	O.R. PROC W DIAGNOSES OF OTHER CONTACT W HEALTH SERVICES	S	\$1,389.94	\$3,209.79	\$3,244.33
462	REHABILITATION	N	\$1,243.85	\$1,565.30	\$1,479.71
463	SIGNS & SYMPTOMS W CC	N	\$1,098.92	\$2,289.46	\$1,865.04
464	SIGNS & SYMPTOMS W/O CC	N	\$1,077.02	\$2,030.48	\$1,647.70
465	AFTERCARE W HISTORY OF MALIGNANCY AS SECONDARY DIAGNOSIS	N	\$1,077.09	\$2,022.35	\$1,437.19
466	AFTERCARE W/O HISTORY OF MALIGNANCY AS SECONDARY DIAGNOSIS	N	\$1,176.58	\$2,206.61	\$1,440.03
467	OTHER FACTORS INFLUENCING HEALTH STATUS	N	\$528.69	\$1,652.95	\$446.24
468	EXTENSIVE O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS	S	\$1,287.22	\$2,412.84	\$4,404.43
471	BILATERAL OR MULTIPLE MAJOR JOINT PROCS OF LOWER EXTREMITY	S	\$1,323.64	\$2,622.63	\$11,686.79
473	ACUTE LEUKEMIA W/O MAJOR O.R. PROCEDURE AGE >17	N	\$1,579.37	\$2,956.99	\$5,034.02
475	RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT	N	\$1,301.93	\$2,751.23	\$4,413.07
476	PROSTATIC O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS	S	\$1,355.99	\$2,360.10	\$2,858.59
477	NON-EXTENSIVE O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS	S	\$1,266.26	\$2,364.63	\$3,256.14
479	OTHER VASCULAR PROCEDURES W/O CC	S	\$1,286.00	\$2,268.78	\$8,531.40
480	LIVER TRANSPLANT AND/OR INTESTINAL TRANSPLANT	S	\$1,963.95	\$4,400.88	\$17,642.10
481	BONE MARROW TRANSPLANT	S	\$2,493.35	\$3,104.26	\$5,732.60
482	TRACHEOSTOMY FOR FACE,MOUTH & NECK DIAGNOSES	S	\$1,394.44	\$2,809.75	\$4,570.59
484	CRANIOTOMY FOR MULTIPLE SIGNIFICANT TRAUMA	S	\$1,383.36	\$2,796.47	\$5,764.37
485	LIMB REATTACHMENT, HIP AND FEMUR PROC FOR MULTIPLE SIGNIFICANT TRA	S	\$1,121.66	\$2,478.63	\$4,955.24
486	OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA	S	\$1,207.27	\$2,598.40	\$6,232.55
487	OTHER MULTIPLE SIGNIFICANT TRAUMA	N	\$1,197.28	\$3,024.88	\$3,469.27
488	HIV W EXTENSIVE O.R. PROCEDURE	S	\$2,322.20	\$4,266.70	\$6,130.45
489	HIV W MAJOR RELATED CONDITION	N	\$2,265.49	\$3,983.98	\$4,352.56
490	HIV W OR W/O OTHER RELATED CONDITION	N	\$1,853.96	\$3,218.62	\$3,159.50
491	MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF UPPER EXTREMITY	S	\$1,144.11	\$2,305.35	\$9,556.38
492	CHEMOTHERAPY W ACUTE LEUKEMIA OR W USE OF HI DOSE CHEMOAGENT	N	\$1,658.29	\$3,061.06	\$5,445.90
493	LAPAROSCOPIC CHOLECYSTECTOMY W/O C.D.E. W CC	S	\$1,090.02	\$2,060.22	\$4,726.43
494	LAPAROSCOPIC CHOLECYSTECTOMY W/O C.D.E. W/O CC	S	\$1,182.04	\$2,108.66	\$6,923.63
495	LUNG TRANSPLANT	S	\$1,604.26	\$3,952.39	\$16,141.55
496	COMBINED ANTERIOR/POSTERIOR SPINAL FUSION	S	\$1,373.31	\$3,042.06	\$13,398.91
497	SPINAL FUSION EXCEPT CERVICAL W CC	S	\$1,210.69	\$2,686.00	\$11,100.91
498	SPINAL FUSION EXCEPT CERVICAL W/O CC	S	\$1,127.08	\$2,429.54	\$13,087.75

TABLE A. — ACUTE INPATIENT FACILITY NATIONWIDE  
PER DIEM CHARGES, BY DRG (DIAGNOSIS RELATED GROUP)

			Per Diem Charge
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DRG	Description	Surgical/Non-Surgical Indicator	Standard Room and Board	ICU Room and Board	Ancillary
499	BACK & NECK PROCEDURES EXCEPT SPINAL FUSION W CC	S	\$1,225.36	\$2,563.42	\$5,822.56
500	BACK & NECK PROCEDURES EXCEPT SPINAL FUSION W/O CC	S	\$1,182.96	\$2,599.28	\$7,738.69
501	KNEE PROCEDURES W PDX OF INFECTION W CC	S	\$1,156.17	\$2,187.85	\$3,971.64
502	KNEE PROCEDURES W PDX OF INFECTION W/O CC	S	\$1,039.00	\$1,859.26	\$3,626.11
503	KNEE PROCEDURES W/O PDX OF INFECTION	S	\$1,254.61	\$2,264.34	\$5,852.39
504	EXTEN. BURNS OR FULL THICKNESS BURN W/MV 96+HRS W/SKIN GFT	S	\$2,737.78	\$6,289.56	\$12,218.76
505	EXTEN. BURNS OR FULL THICKNESS BURN W/MV 96+HRS W/O SKIN GFT	N	\$1,147.13	\$4,560.53	\$5,811.36
506	FULL THICKNESS BURN W SKIN GRAFT OR INHAL INJ W CC OR SIG TRAUMA	S	\$1,696.59	\$3,761.44	\$3,742.72
507	FULL THICKNESS BURN W SKIN GRFT OR INHAL INJ W/O CC OR SIG TRAUMA	S	\$1,082.57	\$3,216.77	\$2,285.42
508	FULL THICKNESS BURN W/O SKIN GRFT OR INHAL INJ W CC OR SIG TRAUMA	N	\$1,320.78	\$4,153.49	\$2,509.13
509	FULL THICKNESS BURN W/O SKIN GRFT OR INH INJ W/O CC OR SIG TRAUMA	N	\$1,015.38	\$3,657.35	\$1,780.89
510	NON-EXTENSIVE BURNS W CC OR SIGNIFICANT TRAUMA	N	\$1,155.86	\$4,190.26	\$2,377.52
511	NON-EXTENSIVE BURNS W/O CC OR SIGNIFICANT TRAUMA	N	\$1,176.95	\$4,271.76	\$2,110.82
512	SIMULTANEOUS PANCREAS/KIDNEY TRANSPLANT	S	\$2,021.25	\$4,239.83	\$20,907.41
513	PANCREAS TRANSPLANT	S	\$2,267.61	\$4,968.72	\$21,258.78
515	CARDIAC DEFIBRILLATOR IMPLANT W/O CARDIAC CATH	S	\$1,416.29	\$2,387.40	\$24,470.68
518	PERC CARDIO PROC W/O CORONARY ARTERY STENT OR AMI	S	\$1,723.91	\$2,605.30	\$11,087.27
519	CERVICAL SPINAL FUSION W CC	S	\$1,161.49	\$2,620.79	\$9,610.83
520	CERVICAL SPINAL FUSION W/O CC	S	\$1,084.42	\$2,470.48	\$15,564.86
521	ALCOHOL/DRUG ABUSE OR DEPENDENCE W CC	N	\$1,266.85	\$2,479.25	\$1,331.59
522	ALC/DRUG ABUSE OR DEPEND W REHABILITATION THERAPY W/O CC	N	\$1,104.97	\$1,864.12	\$290.03
523	ALC/DRUG ABUSE OR DEPEND W/O REHABILITATION THERAPY W/O CC	N	\$1,386.07	\$2,050.27	\$516.18
524	TRANSIENT ISCHEMIA	N	\$1,208.87	\$2,105.10	\$2,947.82
525	OTHER HEART ASSIST SYSTEM IMPLANT	S	\$1,320.85	\$2,531.71	\$10,327.75
528	INTRACRANIAL VASCULAR PROC W PDX HEMORRHAGE	S	\$1,553.52	\$3,616.45	\$7,870.78
529	VENTRICULAR SHUNT PROCEDURES W CC	S	\$1,530.02	\$3,394.67	\$5,233.47
530	VENTRICULAR SHUNT PROCEDURES W/O CC	S	\$1,503.60	\$3,186.20	\$6,241.18
531	SPINAL PROCEDURES W CC	S	\$1,352.93	\$2,935.15	\$5,578.34
532	SPINAL PROCEDURES W/O CC	S	\$1,308.65	\$2,782.23	\$6,890.27
533	EXTRACRANIAL PROCEDURES W CC	S	\$1,217.80	\$2,334.18	\$6,600.87
534	EXTRACRANIAL PROCEDURES W/O CC	S	\$1,153.83	\$2,325.45	\$9,169.60
535	CARDIAC DEFIB IMPLANT W CARDIAC CATH W AMI/HF/SHOCK	S	\$1,656.55	\$2,800.98	\$14,371.35
536	CARDIAC DEFIB IMPLANT W CARDIAC CATH W/O AMI/HF/SHOCK	S	\$1,514.06	\$2,454.37	\$21,866.23
537	LOCAL EXCIS & REMOV OF INT FIX DEV EXCEPT HIP & FEMUR W CC	S	\$1,448.45	\$2,785.48	\$4,793.34
538	LOCAL EXCIS & REMOV OF INT FIX DEV EXCEPT HIP & FEMUR W/O CC	S	\$1,304.13	\$2,953.77	\$6,732.60
539	LYMPHOMA & LEUKEMIA W MAJOR OR PROCEDURE W CC	S	\$1,390.99	\$2,814.39	\$5,156.12
540	LYMPHOMA & LEUKEMIA W MAJOR OR PROCEDURE W/O CC	S	\$1,300.54	\$2,608.69	\$5,853.42
541	ECMO OR TRACH W MV 96+HRS OR PDX EXC FACE, MOUTH & NECK W MAJ O.R.	S	\$1,193.86	\$3,124.55	\$9,618.20
542	TRACH W MV 96+HRS OR PDX EXC FACE, MOUTH & NECK W/O MAJ O.R.	S	\$2,372.39	\$3,875.16	\$12,287.33
543	CRANIOTOMY W/IMPLANT OF CHEMO AGENT OR ACUTE COMPLX CNS PDX	S	\$1,706.62	\$3,570.98	\$6,013.46
544	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY	S	\$1,460.81	\$2,989.35	\$4,874.62
545	REVISION OF HIP OR KNEE REPLACEMENT	S	\$1,517.25	\$2,994.70	\$6,419.14
546	SPINAL FUSION EXC CERV WITH CURVATURE OF THE SPINE OR MALIG	S	\$1,777.65	\$3,346.46	\$11,907.97
547	CORONARY BYPASS W CARDIAC CATH W MAJOR CV DX	S	\$1,999.67	\$4,026.79	\$20,142.57
548	CORONARY BYPASS W CARDIAC CATH W/O MAJOR CV DX	S	\$1,935.47	\$3,978.93	\$6,399.46
549	CORONARY BYPASS W/O CARDIAC CATH W MAJOR CV DX	S	\$1,777.65	\$3,346.46	\$11,907.97
550	CORONARY BYPASS W/O CARDIAC CATH W/O MAJOR CV DX	S	\$1,520.65	\$3,026.91	\$5,951.83
551	PERMANENT CARDIAC PACEMAKER IMPL W MAJ CV DX OR AICD LEAD OR GNRTR	S	\$1,505.57	\$3,051.77	\$6,813.96
552	OTHER PERMANENT CARDIAC PACEMAKER IMPLANT W/O MAJOR CV DX	S	\$1,499.66	\$3,016.37	\$4,975.95
553	OTHER VASCULAR PROCEDURES W CC W MAJOR CV DX	S	\$1,507.19	\$3,053.06	\$6,923.45
554	OTHER VASCULAR PROCEDURES W CC W/O MAJOR CV DX	S	\$1,506.11	\$3,045.38	\$5,040.88
555	PERCUTANEOUS CARDIOVASCULAR PROC W MAJOR CV DX	S	\$1,521.22	\$3,001.61	\$6,511.38

TABLE A. — ACUTE INPATIENT FACILITY NATIONWIDE  
PER DIEM CHARGES, BY DRG (DIAGNOSIS RELATED GROUP)

			Per Diem Charge
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DRG	Description	Surgical/Non-Surgical Indicator	Standard Room and Board	ICU Room and Board	Ancillary
556	PERCUTANEOUS CARDIOVASC PROC W NON-DRUG-ELUTING STENT W/O MAJ CV DX	S	\$1,498.69	\$3,096.58	\$5,063.42
557	PERCUTANEOUS CARDIOVASCULAR PROC W DRUG-ELUTING STENT W MAJOR CV DX	S	\$1,467.86	\$2,895.26	\$5,296.13
558	PERCUTANEOUS CARDIOVASCULAR PROC W DRUG-ELUTING STENT W/O MAJ CV DX	S	\$1,537.12	\$3,082.26	\$6,185.31
559	ACUTE ISCHEMIC STROKE WITH USE OF THROMBOLYTIC AGENT	N	\$1,416.64	\$3,915.32	\$5,238.53